

HEALTH QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2002 OF THE CONDITION AND AFFAIRS OF THE

Cape Health Plan, Inc.

NAIC Group Code _	(Current Period)	0000 N (Prior Period)	AIC Company Code	Employe	er's ID Number 38-2455176
Organized under the	,	,	, State of D	omicile or Port of Ent	ry Michigan
Country of Domicile		·····g•···	United States of		, <u></u>
Country of Borrholic				7 <u>7</u>	
Licensed as business	type: Life, Accider	nt & Health []	Property/Casualty []	Dental Service Co	rporation []
	Vision Servi	ce Corporation []	Other []	Health Maintenand	ce Organization [X]
	Hospital, Me	dical & Dental Servic	e or Indemnity []	Is HMO, Federally	Qualified? Yes [] No [X]
Incorporated	04/29	/1982	Commenced Business		04/29/1982
Statutory Home Office	2671	1 Northwestern High		So	outhfield, MI 48034
		(Street and Number	er)	(City o	r Town, State and Zip Code)
Main Administrative Of	ffice			n Highway, Suite 300	
	Southfield, MI 48	N34	(Street a	nd Number) 248-386	s-3000
	(City or Town, State and Z			(Area Code) (Tele	
Mail Address	26711 Northwe	stern Highway, Suite	300	Southf	ield, MI 48034
		nd Number or P.O. Box)	,	(City or Tow	n, State and Zip Code)
Primary Location of Bo	ooks and Records		26711 No	rthwestern Highway,	
•				(Street and Number)	
	Southfield, MI 48 (City or Town, State and Z			248-386 (Area Code) (Tele	
		ip Code)		, , ,	apriorie Number)
Internet Website Addre	ess		www.capehe	ealth.com	
Statement Contact	THO	MAS ASHFORD MUF			248-386-3003
	tmurar@capehealtl		ame)	(Area Code) 248-94	(Telephone Number) (Extension) 5-9149
	(E-mail Address)			(FAX No	
Policyowner Relations	Contact		26711 Northwester	n Highway, Suite 300	1
Tolloyourior Rolations		(Street and Nu		g,,	
	Southfield				
	Southfield, MI 48 (City or Town, State and Z		·	248-386 (Area Code) (Telephon	
	(City of Town, State and 2	ip code)		(Alea Code) (Telephon	e Number) (Extension)
			OFFICERS		
President		Nancy Wanchik		Secretary	William Brodhead
Treasurer		Ralph Woronoff			
		V	ICE PRESIDENTS		
Miche	le Lundberg	<u>-</u> .	Tom Murar		Steve Stein MD
Rod	ger Prong				
		DIDEC	TARE AR TRUCT	FF0	
None	w Wanchik	DIKEC	TORS OR TRUST	EE3	Suriit Phasin MD
	ette Burns		Ralph Woronoff Etrue Bryant		Surjit Bhasin MD Shirley Lightsey
	mas Murar		Sue Sarin		Gladys Taylor
	ra French		William Brodhead		Janis Coleman

State ofMichigan	·····}	SS
County ofMacomb)	

The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively.

President & Chief Operating Officer
Nancy Wanchik

Chief Financial Officer
Thomas Murar

Subscribed and sworn to before me this
12 day of November, 2002

Linda Rusie Notary Public March 26, 2003

ASSETS

	ASSEIS							
		1	Current Period 2	3	Prior Year 4			
		Assets	Nonadmitted Assets	Net Admitted Assets	Net Admitted Assets			
1.	Bonds	1,004,000		1,004,000	1,189,000			
2.	Stocks:							
	2.1 Preferred stocks							
	2.2 Common stocks							
3.	Mortgage loans on real estate:							
	3.1 First liens							
	3.2 Other than first liens							
4.	Real estate (Schedule A):							
	4.1 Properties occupied by the company (less							
	\$encumbrances)			.(a)				
	4.2 Properties held for the production of income							
	(less \$encumbrances)							
	4.3 Properties held for sale (less							
	\$ encumbrances)							
5.	Cash (\$22,052,084) and short-term investments							
	(\$)	22,052,084		22,052,084	19,540,349			
6.	Other long-term invested assets							
	Receivable for securities							
8.	Aggregate write-ins for invested assets	3 , 125		3, 125	3 , 125			
	Subtotals, cash and invested assets (Lines 1 to 8)							
	Accident and health premiums due and unpaid							
	Health care receivables							
	Amounts recoverable from reinsurers							
	Net adjustment in assets and liabilities due to foreign exchange rates							
	Investment income due and accrued							
15.	Amounts due from parent, subsidiaries and affiliates							
	Amounts receivable relating to uninsured accident and health plans							
	Furniture and equipment							
	Amounts due from agents							
	Federal and foreign income tax recoverable and interest thereon (including							
	\$net deferred tax asset)							
20	Electronic data processing equipment and software		35,842		303,984			
	Other nonadmitted assets		366, 228					
	Aggregate write-ins for other than invested assets				653 , 413			
	Total assets (Lines 9 plus 10 through 22)	24,950,667	402,070	24 548 597	23,393,222			
	DETAILS OF WRITE-INS	1 1	- 1-1-1	15.15.15.	= 1 = = = 1			
0801	Security Deposit	3 125		3 125	3 125			
	Statutory Deposit				0			
	ordinary supposition.							
	Summary of remaining write-ins for Line 8 from overflow page							
	Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above)	3,125		3,125	3,125			
	Employee Loan	·		288				
	Federal Income Tax				290			
	SBT.			26,025	175,000			
	Summary of remaining write-ins for Line 22 from overflow page	·		,	74,026			
		90,691		90,691	653,413			
<u> </u>	Totals (Lines 2201 thru 2203 plus 2298) (Line 22 above)	90,091		1 60,081	000,413			

(a) \$health care delivery assets included in Line 4.1, Column 3

LIABILITIES, CAPITAL AND SURPLUS

LIABILITIES, CA	ALTIAE AI1E	Current Period		Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
Claims unpaid (less \$ reinsurance ceded)	11 ,723 , 619		11 ,723 , 619	12,080,208
Accrued medical incentive pool and bonus payments	532 , 253		532,253	496 , 369
Unpaid claims adjustment expenses				
Aggregate policy reserves				
Aggregate claim reserves				
Premiums received in advance				
General expenses due or accrued	4,073,069		4,073,069	2 , 199 , 537
Federal and foreign income tax payable and interest thereon (including				
\$ on realized capital gains (losses) (including				
\$ net deferred tax liability)				
Amounts withheld or retained for the account of others				
10. Borrowed money (including \$				
interest thereon \$(including				
\$current)				
11. Amounts due to parent, subsidiaries and affiliates				
Payable for securities				
Fayable for securities 13. Funds held under reinsurance treaties with (\$				
authorized reinsurers and \$unauthorized				
reinsurers)				
14. Reinsurance in unauthorized companies				
15. Net adjustments in assets and liabilities due to foreign exchange rates				
Liability for amounts held under uninsured accident and health plans				
Aggregate write-ins for other liabilities (including \$				ļ
current)				
18 Total liabilities (Lines 1 to 17)				
19. Common capital stock	XXX	XXX	1,000	1,000
20 Preferred capital stock	XXX	XXX		
21. Gross paid in and contributed surplus	XXX	XXX		
22. Surplus notes	XXX	XXX		
23. Aggregate write-ins for other than special surplus funds	XXX	XXX		
24. Unassigned funds (surplus)	xxx	XXX	7 ,798 ,527	8 , 058 , 699
25. Less treasury stock, at cost:				
25.1shares common (value included in Line 19	9)			
\$)	xxx	XXX		
25.2shares preferred (value included in Line 2	0)			-
\$)	xxx	xxx		
26. Total capital and surplus (Lines 19 to 25)	xxx	xxx	7 ,799 ,527	8,059,699
27. Total liabilities, capital and surplus (Lines 18 and 26)	xxx	xxx	24,548,597	23,393,222
DETAILS OF WRITE-INS				
1701. Accrued Expenses	145,342		145,342	158,081
1702. Accrued PTO	111,811		111,811	111,530
1703. Deferred Income Tax				27 , 976
1798. Summary of remaining write-ins for Line 17 from overflow page	, in the second of the second			259,822
1799. Totals (Lines 1701 thru 1703 plus 1798) (Line 17 above)	420,129		420,129	557,409
2301.		XXX		007 100
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page				
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above)	XXX	XXX		

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENUE	Current Year	to Date	Prior Year
		1	2	3
		Uncovered	Total	Total
1.	Member Months	XXX	423,671	481,875
			70 700 404	00 440 470
	Net premium income			
3.	Change in unearned premium reserves and reserve for rate credits			
4.	Fee-for-service (net of \$ medical expenses)			
5.	Risk revenue			
6.	Aggregate write-ins for other health care related revenues			
7.	Total revenues (Lines 2 to 6)	XXX	73 ,728 , 424	88 , 118 , 476
	Medical and Hospital:			
8.	Hospital/medical benefits		39 ,415 ,168	48 , 277 , 959
9.	Other professional services		10,831,070	12,380,811
10.	Outside referrals			
11.	Emergency room and out-of-area		4,533,375	4 , 200 , 999
12.	Prescription drugs		7 ,822 , 276	7 , 556 , 624
13.	Aggregate write-ins for other medical and hospital		1 , 364 , 929	1 , 136 , 483
14.	Incentive pool and withhold adjustments		450 , 000	480 , 000
15.	Subtotal (Lines 8 to 14)		64,416,818	74,032,876
	Less:			
16.	Net reinsurance recoveries			
17.	Total medical and hospital (Lines 15 minus 16)		64,416,818	74 , 032 , 876
18.	Claims adjustment expenses		(33 , 139)	
19.	General administrative expenses		8,284,069	11 , 108 , 761
20.	Increase in reserves for accident and health contracts			
21.	Total underwriting deductions (Lines 17 through 20)		72,667,748	85 , 141 , 637
22.	Net underwriting gain or (loss) (Lines 7 minus 21)			
23.	Net investment income earned			
	Net realized capital gains or (losses)			
25.	Net investment gains or (losses) (Lines 23 plus 24)		272,517	888 , 375
26.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered			
	\$) (amount charged off \$			
27.	Aggregate write-ins for other income or expenses			(423,561)
28.	Net income or (loss) before federal income taxes (Lines 22 plus 25 plus 26 plus 27)			, ,
29.	Federal and foreign income taxes incurred		453, 285	
30.	Net income (loss) (Lines 28 minus 29)	XXX	879,908	2,242,768
	DETAILS OF WRITE-INS	7001		1 1 22
0601.		XXX		
0602.		xxx		
0603.		xxx		
0698.	Summary of remaining write-ins for Line 6 from overflow page	xxx		
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	XXX		
1301.	Patient Transportation		1 , 364 , 929	1 , 136 , 483
1302.				
1303.				
1398.	Summary of remaining write-ins for Line 13 from overflow page			
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		1,364,929	1 , 136 , 483
2701.	Disposition of Fixed Assets			(423 , 561)
2702.				
2703.				
2798.	Summary of remaining write-ins for Line 27 from overflow page			
2799.	Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)			(423, 561)

CAPITAL AND SURPLUS ACCOUNT

	CAPITAL AND SURPLUS ACCOUN	1 Current Year to Date	2 Prior Year
		Current rear to Date	Filol feat
	CAPITAL AND SURPLUS ACCOUNT:		
31.	Capital and surplus prior reporting period	8,059,699	9,672,729
	GAINS AND LOSSES TO CAPITAL & SURPLUS:		
32.	Net income or (loss) from Line 30	879,908	2,242,768
33.	Change in valuation basis of aggregate policy and claim reserves		
34.	Net unrealized capital gains and losses		
35.	Change in net unrealized foreign exchange capital gain or (loss)		
36.	Change in net deferred income tax		
37.	Change in nonadmitted assets	109,920	144 , 202
38.	Change in unauthorized reinsurance		
39.	Change in treasury stock		
40.	Change in surplus notes		
41.	Cumulative effect of changes in accounting principles		
42.	Capital Changes:		
	42.1 Paid in		
	42.2 Transferred from surplus (Stock Dividend)		
	42.3 Transferred to surplus		
43.	Surplus adjustments:		
	43.1 Paid in		
	43.2 Transferred to capital (Stock Dividend)		
	43.3 Transferred from capital		
44.	Dividends to stockholders	(1,250,000)	(4,000,000)
45.	Aggregate write-ins for gains or (losses) in surplus		,
46.	Net change in capital & surplus (Lines 32 to 45)		(1,613,030)
47.	Capital and surplus end of reporting period (Line 31 plus 46)	7,799,527	8,059,699
	DETAILS OF WRITE-INS	1	,
4501.	DETAILS OF WINTE-INS		
4502.			
4503.			
4598.	Summary of remaining write-ins for Line 45 from overflow page		
4599.	Totals (Lines 4501 thru 4503 plus 4598) (Line 45 above)		

CASH FLOW

CASH FLOW		
	1 Current Year to Date	2 Prior Year
Cash from Operations		
Premiums and revenues collected net of reinsurance	73,728,424	88 , 118 , 476
Claims and claims adjustment expenses	64 ,737 ,523	75 , 205 , 985
General administrative expenses paid		
Other underwriting income (expenses)		
5. Cash from underwriting (Line 1 minus Line 2 minus Line 3 plus Line 4)	706,832	1 ,803 ,730
Net investment income	272,517	888 , 375
7. Other income (expenses)		(5, 390)
Federal and foreign income taxes (paid) recovered	(450 005)	(1, 198, 885)
9. Net cash from operations (Lines 5 to 8)	559,203	1,487,830
Cash from Investments		
Proceeds from investments sold, matured or repaid:		
10.1 Bonds	295.000	300 . 533
10.2 Stocks		
10.3 Mortgage loans		
10.4 Real estate		
10.5 Other invested assets		
10.6 Net gains or (losses) on cash and short-term investments		
10.7 Miscellaneous proceeds		
10.8 Total investment proceeds (Lines 10.1 to 10.7)		300 533
11. Cost of investments acquired (long-term only):	250,000	
11.1 Bonds	110 000	789 000
11.2 Stocks		
11.3 Mortgage loans		
11.4 Real estate		
11.5 Other invested assets		
11.6 Miscellaneous applications		790,000
11.7 Total investments acquired (Lines 11.1 to 11.6)		789,000
12. Net Cash from investments (Line 10.8 minus Line 11.7)	185,000	(488, 467)
Cash from Financing and Miscellaneous Sources		
13. Cash provided:		
13.1 Surplus notes, capital and surplus paid in		
13.2 Net transfers from affiliates		
13.3 Borrowed funds received		
13.4 Other cash provided		
13.5 Total (Lines 13.1 to 13.4)	3,263,426	337 , 764
14. Cash applied:		
14.1 Dividends to stockholders paid	1,250,000	4 ,000 ,000
14.2 Net transfers to affiliates		
14.3 Borrowed funds repaid		
14.4 Other applications	245,894	1,295,621
14.5 Total (Lines 14.1 to 14.4)	1,495,894	5,295,621
15. Net cash from financing and miscellaneous sources (Line 13.5 minus Line 14.5)	1,767,532	(4,957,857)
RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS		
16. Net change in cash and short-term investments (Line 9 plus Line 12 plus Line 15)	2,511,735	(3,958,494)
17. Cash and short-term investments:		
17.1 Beginning of period	19,540,349	23 , 498 , 843
17.2 End of period (Line 16 plus Line 17.1)	22,052,084	19,540,349

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

				INKOLLIVI		OIILIL	A11014			
	1	(Hospital	hensive & Medical)	4	5	6	7	8	9	10
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	43,768								43,768	
2 First Quarter	45,039								45 ,039	
3 Second Quarter	46,488								46 ,488	
4. Third Quarter	52,591								52,591	
5. Current Year										
6 Current Year Member Months	32 671								423,671	
Total Member Ambulatory Encounters for Period:										
7. Physician	32438								23 ,438	
8. Non-Physician	3, 0 79								13,079	
9. Total	36,517								36,517	
10. Hospital Patient Days Incurred	5, 5 51								15,551	
11. Number of Inpatient Admissions	3,574								3,574	
12. Premiums Collected	73,728,424								73 ,728 ,424	
13. Premiums Earned	73,728,424								73,728,424	
14. Amount Paid for Provision of Health Care Services	51,212,488								51,212,488	
15. Amount Incurred for Provision of Health Care Services	11, 32 619								11,723,619	

CLAIMS PAYABLE (Reported and Unreported)

Aging Analysis of Unpaid Claims									
1	2	3	4	5	6	7			
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total			
Claims Payable (Reported)									
				†	-				
				†					
		-		†					
				1					
		<u> </u>		İ					
				ļ					
					-				
0199999 Individually Listed Claims Payable									
0299999 Aggregate Accounts Not Individually Listed-Uncovered									
0399999 Aggregate Accounts Not Individually Listed-Covered									
0499999 Subtotals									
0599999 Unreported Claims and Other Claim Reserves	XXX	XXX	XXX	XXX	XXX	11,78,2619			
0699999 Total Amounts Withheld	XXX	XXX	XXX	XXX	XXX	0			
0799999 Total Claims Payable	XXX	XXX	XXX	XXX	XXX	11, 3 2,2619			
0899999 Accrued Medical Incentive Pool	XXX	XXX	XXX	XXX	XXX	532,253			

..

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE CAPE HEALTH PLAN, INC.

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE Claims Liability										
	Paid Yea		End of Current Quarter		_	0				
	Paid Yea	r to Date 2	End of Curr	eni Quarier	5	6				
Line of Business	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid Dec. 31 of Prior Year	On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year				
Comprehensive (Hospital & Medical)										
Medicare Supplement										
Medicare Supplement	-									
3. Dental Only										
4. Vision Only										
5. Federal Employees Health Benefits Plan Premiums										
6. Title XVIII - Medicare										
6. Title Aviii - Medicale										
	0.705.470	54 040 400		44 700 040	0.505.470	40.000.000				
7. Title XIX - Medicaid	3 ,5 65,472	51,212,488	0	11,723,619	3 ,5 65,472	12,080,208				
8. Other										
9. Subtotal	3 ,5 65,472	51,212,488		11,723,619	3, 5 65,472	12,080,208				
		· ' '								
10. Medical incentive pools, accruals and disbursements	414 , 116		82,253	450,000	496,369	496,369				
10. Miculcal illuctilive puolo, acciualo allu dispursemento	414,110			450,000	400,308					
		5, 0,0, 100								
11. Totals	3, 9 79,588	51,212,488	82,253	12, 173, 619	14,061,841	12,576,577				

NOTES TO FINANCIAL STATEMENTS

hese statements have not been completed in accordance with the NAIC Accounting Practices and Procedures Manual. The Commissioner of the State of Michigan Office of Financial and Insurance Services issued the following notification regarding reporting:

"By Order 00-086-M dated November 15, 2000, the Commissioner adopted the NAIC Accounting Practices and Procedures Manual effective January 1, 2001, including appendices A - F and excluding Acturial Guideline XXXV in Appendix C. This order applies to fire and casualty insurers, life, accident, and health insurers, non-U.S. insurers, title insurers and fraternal benefit societies. For health maintenance organizations and alternative financing and delivery systems and dental service corporations, the Commissioner has delayed adoption of the NAIC Accounting Pratices and Procedures Manual with an effective date of January 1, 2002. These entities will continue to follow previous statutory accounting practices and procedures until the Commissioner officially adopts the new manual for these entities."

GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since the prior year end unless otherwise noted.)

PART 1 - COMMON INTERROGATORIES GENERAL

1.1		rimplement any significant accounting policy changes which woul			Yes []	No	[X]
1.2	If yes, explain:						
2.1		experience any material transactions requiring the filing of Disclo			Yes []	No	[X]
2.2	If yes, has the report b	een filed with the domiciliary state?			Yes []	No	[]
3.1	, ,	made during the year of this statement in the charter, by-laws, art	. ,		Yes []	No	[X]
3.2	If yes, date of change:						
	If not previously filed,	furnish herewith a certified copy of the instrument as amended.					
4.		substantial changes in the organizational chart since the prior qual	rter end?		Yes []	No	[X]
	If yes, attach an orgar	izational chart.					
5.1	Has the reporting entit	y been a party to a merger or consolidation during the period cover	ered by this statement?		Yes []	No	[X]
5.2		ne of entity, NAIC Company Code, and state of domicile (use two sult of the merger or consolidation.	letter state abbreviation) for a	ny entity that has			
		1 Name of Entity	2 NAIC Company Code	3 State of Domicile			
6.		s subject to a management agreement, including third-party admir ent, have there been any significant changes regarding the terms			Yes [] No [X]	NA	[]
	If yes, attach an expla	nation.					
7.1	State as of what date	the latest financial examination of the reporting entity was made o	r is being made		12	/31/1	1999
7.2	State the as of date the date should be the da	at the latest financial examination report became available from e e of the examined balance sheet and not the date the report was	ither the state of domicile or t	he reporting entity. This	12	/31/1	1999
7.3	the reporting entity. The	the latest financial examination report became available to other s iis is the release date or completion date of the examination repor	t and not the date of the exar	nination (balance sheet	12	/31/1	1999
7.4	By what department o	r departments?					
	OFFICE OF FINANCIAL	AND INSURANCE SERVICES, STATE OF MICHIGAN					
8.1	or revoked by any gov	ty had any Certificates of Authority, licenses or registrations (incluernmental entity during the reporting period? (You need not reports part of the agreement.)	t an action, either formal or ir	nformal, if a	Yes []	No	[X]
8.2	If yes, give full informa	tion:					

GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since the prior year end unless otherwise noted.)

INVESTMENT

9.1	Has there been any change in the reporting entity's own preferred or commor	stock?					Ye	es []	No [X]
9.2	If yes, explain:								
10.1	Were any of the stocks, bonds, or other assets of the reporting entity loaned, for use by another person? (Exclude securities under securities lending agree						Ύ€	es []	No [X]
10.2	If yes, give full and complete information relating thereto:								
11.	Amount of real estate and mortgages held in other invested assets in Schedu								
12.	Amount of real estate and mortgages held in short-term investments:					\$			
13.1	Does the reporting entity have any investments in parent, subsidiaries and a	ffiliates?					Y	res [] No [X]
13.2	If yes, please complete the following:								
13.2	I Bonds	\$	Staten	1 Year-End nent Value		2 Current Quarter Statement Value	:		
13.22 13.23	Preferred Stock	\$			\$				
13.24	Short-term Investments	\$			\$				
13.26	All Other	\$			i i				
13.27	to 13.26)	\$							
13.28 13.29					i.				
14.1	Does the reporting entity have any hedging transactions reported on Schedule	e DB?					Ύε	es []	No [X]
14.2	If yes, has a comprehensive description of the hedging program been made a	available to the	domicili	ary state?			Υe	es []	No [X]
	If no, attach a description with this statement.								
15.	Excluding items in Schedule E, real estate, mortgage loans and investments deposit boxes, were all stocks, bonds and other securities, owned throughout qualified bank or trust company in accordance with Part 1 - General, Section Financial Condition Examiners Handbook?	the current ye IV.H - Custodi	ear held p al or Safe	oursuant to a custoo ekeeping Agreeme	dial agreer	nent with a NAIC	Υє	es []	No [X]
15.1	For all agreements that comply with the requirements of the NAIC Financial C	Condition Exam	niners Ha	andbook, complete	the followi	ng:			
	1 Name of Custodian(s)			2 Custodian Addres					
	Name of Custoulan(s)			Custodian Addres	55				
15.2	For all agreements that do not comply with the requirements of the NAIC Final location and a complete explanation:	ancial Conditio	n Examir	ners Handbook, pro	ovide the n	ame,			
	1 2 Name(s) Locatio	nn(s)		3 Complete Exp	lanation(s)				
	Merrill LynchWest Bloomfield		STOCK						
							V		A1 FV 3
	Have there been any changes, including name changes in the custodian(s) id	dentified in 15.	1 during t	the current year?			Ye	es []	No [X]
15.4	If yes, give full and complete information relating thereto:								
	1 2 Old Custodian New Custodian	3 Date of C	hange	Re	4 eason				
15.5	Identify all investment advisors, brokers/dealers or individuals acting on beha accounts, handle securities and have authority to make investments on behal				e investme	ent			
	1	2			3				
	Central Registration Depository	Name(s)		F	Address				

SCHEDULE A - VERIFICATION

		1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1.	Book/adjusted carrying value, beginning of period				
	Increase (decrease) by adjustment				
	Cost of acquired				
	Cost of additions to and permanent improvements				
5.	Total profit (loss) on sales				
6.	Increase (decrease) by foreign exchange adjustment				
	Amount received on sales				
8.	Book/adjusted carrying value at end of current period				
9.	Total valuation allowance				
	Subtotal (Lines 8 plus 9)				
11.	Total nonadmitted amounts				
12.	Statement value, current period (Page 2, real estate lines, current period)				

SCHEDULE B - VERIFICATION

OGITED CEE	7	0/11/011		
	1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
Book/recorded investment excluding accrued interest on mortgages owned beginning of period				
2. Amount loaned during period:				<u> </u>
2.1. Actual cost at time of acquisitions				
2.2. Additional investment made after acquisitions				
3. Accrual of discount and mortgage interest points and committment fees				
Increase (decrease) by adjustment				
5. Total profit (loss) on sale				
6. Amounts paid on account or in full during the period				
7. Amortization of premium				
Increase (decrease) by foreign exchange adjustment				
Book value/recorded investment excluding accrued interest on mortgages owned at end of current period				
10. Total valuation allowance				
11. Subtotal (Lines 9 plus 10)				
12. Total nonadmitted amounts				
13. Statement value of mortgages owned at end of current period				

SCHEDULE BA - VERIFICATION Other Invested Assets Included in Schedule BA

First Quarter Second Quarter Third Quarter Prior Year Ended Current Year Current Year **Current Year** December 31 1. Book/adjusted carrying value of long-term invested assets owned, beginning 2. Cost of acquisitions during period: 2.1. Actual cost at time of acquisitions 2.2. Additional investment made after acquisitions 3. Accrual of discount .. 4. Increase (decrease) by adjustment ... 5. Total profit (loss) on sale. 6. Amounts paid on account or in full during the period. 7. Amortization of premium 8. Increase (decrease) by foreign exchange adjustment... 9. Book/adjusted carrying value of long-term invested assets at end of current period. 10. Total valuation allowance 11. Subtotal (Lines 9 plus 10)

12. Total nonadmitted amounts

13. Statement value of long-term invested assets at end of current period

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	1 Statement Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Statement Value End of First Quarter	6 Statement Value End of Second Quarter	7 Statement Value End of Third Quarter	8 Statement Value December 31 Prior Year
BONDS								
1. Class 1	1,004,000				1 ,004 ,000	1,004,000	1,004,000	1,189,000
2. Class 2								
3. Class 3								
4. Class 4								
5. Class 5								
6. Class 6								
7. Total Bonds	1,004,000				1,004,000	1,004,000	1,004,000	1,189,000
PREFERRED STOCK								
8. Class 1								
9. Class 2								
10. Class 3								
11. Class 4								
12. Class 5								
13. Class 6								
14. Total Preferred Stock								
15. Total Bonds and Preferred Stock	1,004,000				1,004,000	1,004,000	1,004,000	1,189,000

SCHEDULE DA - PART 1

Short-Term Investments Owned End of Current Quarter

	1	2	3	4	5				
				Amount of Interest	Paid for				
	Book/Adjusted			Received Current	Accrued				
	Carrying Value	Par Value	Actual Cost	Quarter	Interest				
8099999 Totals		XXX							

SCHEDULE DA - PART 2- Verification

Short-Term Investments Owned							
	1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31			
Book/adjusted carrying value, beginning of period							
Cost of short-term investments acquired							
Increase (decrease) by adjustment							
Increase (decrease) by foreign exchange adjustment							
Total profit (loss) on disposal of short-term investments							
Consideration received on disposal of short-term investments							
7. Book/adjusted carrying value, current period							
Total valuation allowance							
9. Subtotal (Lines 7 plus 8)							
10. Total nonadmitted amounts							
11. Statement value (Lines 9 minus 10)							
12. Income collected during period							
13. Income earned during period							

SCHEDULE DB - PART F- SECTION 1

Summary of Replicated (Synthetic) Assets Open

	Replicated (Synthetic) Asset					,	Compo	nents of the Replicated (Synthetic)	Asset		
1	2	3	4	5	Derivative Instruments	Open		Cash	Instrument(s) He	eld	
					6	7	8	9	10	11	12
Replication		NAIC									NAIC
RSAT		Designation or Other Description	Statement						Statement		Designation or
Number	Description	Other Description	Value	Fair Value	Description	Fair Value	CUSIP	Description	Value	Fair Value	Other Description

9999999 Totals					XXX		XXX	XXX			XXX

SCHEDULE DB - PART F - SECTION 2

Reconciliation of Replicated (Synthetic) Assets Open

	First Q	luarter	Second	Quarter	Third (Quarter	Fourth	Quarter	Year-to	o-Date
	1	2	3	4	5	6	7	8	9	10
	Number of Positions	Total Replicated (Synthetic) Assets Statement Value	Number of Positions	Total Replicated (Synthetic) Assets Statement Value	Number of Positions	Total Replicated (Synthetic) Assets Statement Value	Number of Positions	Total Replicated (Synthetic) Assets Statement Value	Number of Positions	Total Replicated (Synthetic) Assets Statement Value
Beginning Inventory										
Add: Opened or Acquired Transactions										
Add: Increases in Replicated Asset Statement Value	XXX									
Less: Closed or Disposed of Transactions										
Less: Positions Disposed of for Failing Effectiveness Criteria										
Less: Decreases in Replicated (Synthetic) Asset Statement Value	XXX									
7. Ending Inventory										

SCHEDULE S—CEDED REINSURANCE Showing all new reinsurers - Current Year to Date

1	2	3	4	5 Is Insurer
NAIC Company Code	Federal ID Number	Name of Reinsurer LIFE AND ANNUITY AFFILIATES	Location	Authorized? (Yes or No)
		LIFE AND ANNUITY NON-AFFILIATES		
		ACCIDENT AND HEALTH AFFILIATES		
67150	41-0451140	ACCIDENT AND HEALTH NON-AFFILIATES	Minneapolis, MN	Yes

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

			1	Allocated by	States and Territories		Only Year-to-Date	
			'	_	3	4	5	6
	States, Etc.		Guaranty Fund (Yes or No)	Is Insurer Licensed? (Yes or No)	Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefit Program Premium
1.	Alabama	AL	No	No				
2.	Alaska	AK	No	No				
3.	Arizona	AZ	No	No				
4.	Arkansas	AR	No	No				
5.	California	CA	No	No				
6.	Colorado	CO	No	No				
7.	Connecticut	CT	No	No				
8.	Delaware	DE	No	No				
9.	District of Columbia	DC	No	No				
10.	Florida	FL	No	No				
11.	Georgia	GA	No	No				
12.	Hawaii	HI	No	No				
13.	ldaho	ID	No	No				
14.	Illinois	IL	No	No				
15.	Indiana	IN	No	No				
	lowa		No	No				
	Kansas		No	No				
	Kentucky		No	No				
	Louisiana		No	No				
	Maine		No	No				
	Maryland		No	No				
	Massachusetts		No	No				
	Michigan		No	Yes			73 ,728 , 424	
	Minnesota		No	No				
	Mississippi		No	No			-	
	Missouri		No	No				
	Montana		No	No				
	Nebraska		No	No				
	Nevada		No	No				
	New Hampshire		No	No				
	New Jersey		No	No				
	New Mexico		No	No				
	New York		No	No				
	North Carolina		No	No				
	North Dakota		No No	No No				
	OhioOklahoma		No	M-				
	Oregon		No	M-				
	Pennsylvania			No				
	Rhode Island			No				
	South Carolina			M-				
	South Dakota			No				
	Tennessee							
	Texas		No					
	Utah							
	Vermont		No					
	Virginia							
	Washington							
	West Virginia							
	Wisconsin							
	Wyoming							
	American Samoa							
	Guam							
	Puerto Rico							
	U.S. Virgin Islands							
	Canada							
	Aggregate Other Alien			XXX				
	Total (Direct Business)		XXX	(a) 1			73,728,424	
	DETAILS OF WRITE-INS	_	_			'		
	DETAILS OF WHITE INS				1	i	1	I .
58.								
58. 701.								

⁽a) Insert the number of yes responses except for Canada and Other Alien.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART

HCLB, Inc. Holding Company Tax ID: 38-3535959

Subsidiaries:

CAPE health Plan, Inc. Licensed HMO - State of Michigan Tac Id - 38-2455176

Springwater Management, Inc. Tax ID: 38-3300867

Cape Management, Inc. Tax ID: 38-3511552

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing on "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory question.

	RESPONSE
Will the SVO Compliance Certification be filed with this statement?	Yes
xplanation:	
ar Code:	

OVERFLOW PAGE FOR WRITE-INS

MQ002 Additional Aggregate Lines for Page 02 Line 22.

SS	

2204. Leasehold Improvement	64,378	64,378	74,026
2297. Summary of remaining write-ins for Line 21 from Page 02	64,378	64,378	74,026

MQ003 Additional Aggregate Lines for Page 03 Line 17. *LIAB

1704.	Accrued Profit Sharing	135,000	135,000	166, 263
1705.	·		0	2,559
1706.			0	91,000
1797.	Summary of remaining write-ins for Line 17 from Page 03	135,000	135,000	259 822

SCHEDULE A - PART 2

			Showing	all Real Estate ACQUIRED During the Current Quarter				
1			4	5	6	7	8	9
	Loc	ation						
	2	3						Expended for Additions
			Date				Book/Adjusted Carrying	and Permanent
Description of Property	City	State	Acquired	Name of Vendor	Actual Cost	Amount of Encumbrances	Book/Adjusted Carrying Value Less Encumbrances	Expended for Additions and Permanent Improvements
							 	
							 	
					 	İ	†	
							·	
							 	
							†	
							İ	
9999999 - Totals								!

SCHEDULE A - PART 3

		Snowii	ig ali Real Est	ate SOLD during the Current	Quarter, incit	iding Payment	s auring the F	inal Year on "S	ales under Co	ntract					
1	Loc	cation	4	5	6	7	8	9	10	11	12	13	14	15	16
	2	3	1		_	· ·		Expended							
	_	Ŭ						for Additions,						Gross	
									D 1/						
								Permanent	Book/					Income	
							Increase	Improvements	Adjusted					Earned Less	
						Increase	(Decrease)	and Changes	Carrying		Foreign			Interest	Taxes,
						(Decrease)	by Foreign	in	Value Less		Exchange	Realized	Total Profit	Incurred on	Repairs and
			Disposal			by	Exchange	Encum-	Encum-	Amounts	Profit (Loss)	Profit (Loss)	(Loss) on	Encum-	Expenses
Description of Property	City	State	Date	Name of Purchaser	Actual Cost		Adjustment	brances	brances	Received	on Sale	on Sale	Sale	brances	Incurred
Description of Froperty	City	State	Date	Ivanie or i dichaser	Actual Cost	Aujustinent	Aujustinent	Diances	Diances	Received	On Sale	on oale	Jaie	Diances	incurred
			-					-						·····	·
															-
															-
															-
					ļ									ļ	
															.
															.
		.]													
	j	.]	İ	İ	<u> </u>	İ	İ			İ		İ		İ	.i
9999999 Totals			1												
วิวิวิวิวิวิ 1 (เดเจ						l .	l	l		l .		l .		1	

SCHEDULE B - PART 1

		Showing a	all Mortgage Loans ACQU	IRED during the	Current Quarter					
1	Locati		4	5	6	7	8	9	10	11
	2	3								
						Book Value/Recorded Investment Excluding Accrued Interest		Increase (Decrease)		Date of Last
	O':	0			5	Investment Excluding	Increase (Decrease)	by Foreign Exchange	Value of Land and	Appraisal or Valuation
Loan Number	City	State	Loan Type	Date Acquired	Rate of Interest	Accrued Interest	by Adjustment	Adjustment	Buildings	Valuation
										·····
			•							•
								+		
						1		1		
			·····							
			•••••							
			l							
9999999 Totals			+							XXX

SCHEDULE B - PART 2

			wing all ivid	ilyaye Loa	ns SOLD, transferre	or paid in full duri	ng the Current Quar	ter				
1	Loca	ation	4	5	6	7	8	9	10	11	12	13
	2	3			Book			Book				
					Value/Recorded			Value/Recorded				
					Investment		Increase	Investment				
							(Danna and Jan	Firelia a Asserta		Familia Fredrica	Darlings	T-4-1
				D .	Excluding Accrued	Increase	(Decrease) by	Excluding Accrued	0	Foreign Exchange Profit (Loss)	Realized	Total
			Loan	Date	Interest	(Decrease) by	Foreign Exchange	Interest	Consideration	Profit (Loss)	Profit (Loss)	Profit (Loss)
Loan Number	City	State	Type	Acquired	Prior Year	Adjustment	Adjustment	at Disposition	Received	on Sale	on Sale	on Sale
İİ			İ				İ	İ				
							l					
			ĺ				İ					
9999999 Totals	J	 	<u> </u>	•								
aaaaaaa i otais												

9999999 Totals

STATEMENT AS OF SEPTEMBER 30, 2002 OF THE CAPE HEALTH PLAN, INC.

SCHEDULE BA - PART 1

		Showi	ng Other Long-Term Invested Assets ACQ	UIRED during the Curre	ent Quarter				
1	Location		4	5	6	7	8	9	10
	2	3		Date	Actual	Amount of	Book/Adjusted Carrying Value Less Encumbrances	Increase (Decrease)	Increase (Decrease) by Foreign Exchange
Number of Units and Description	City	State	Name of Vendor	Acquired	Cost	Encumbrances	Less Encumbrances	by Adjustment	Adjustment
		 		_					

SCHEDULE BA - PART 2

		Showing Oth	ner Long-Term Invested Assets SOLD, t	ransierreu or paid	i ini iuli during t	ne Current Qua	ırter					
1	Loca	tion	4	5	6	7	8	9	10	11	12	13
	2	3			Book/			Book/				
					Adjusted			Adjusted				
					Carrying		Increase	Carrying				
					Value Less	l .	(Decrease) by	Value Less		Foreign Exchange		
					Encum-	Increase	Foreign	Encum-			Realized	Total
			Name of Purchaser or		brances,	(Decrease)	Exchange	brances at	Consideration	Profit (Loss)	Profit (Loss)	Profit (Loss)
Number of Units and Description	City	State	Nature of Disposition	Date Acquired	Prior Year	by Adjustment	Adjustment	Disposition	Received	on Sale	on Sale	on Sale
						1	<u> </u>					
9999999 Totals				•								

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired by the Company During the Current Quarter

			g-renni Bonds and Stock Acquired by the Company During the			_		
1	2	3	4	5	6	7	8	9
CUSIP				Number of	Actual		Paid for Accrued	NAIC
00011	B	D . A	N CV I	Number of	Actual	5 1/ 1	I ald for Accided	D : (a)
Identification	Description	Date Acquired	Name of Vendor	Shares of Stock	Cost	Par Value	Interest and Dividends	
6099999 - Total	- Bonds							XXX
6599999 - Total	- Preferred Stocks					XXX		XXX
7099999 - Total	- Common Stocks					XXX		XXX
7100000 Total	- Preferred and Common Stocks					XXX		XXX
/199999 - 10tal	- Preferred and Common Stocks	T				۸۸۸		۸۸۸
								-
L								
							İ	
								•
İ	j	İ				İ	İ	Ĭ
<u> </u>							·	+
·						+		
ļ								
							1	-
								+
7299999 - Totals						XXX		XXX

⁽a) For all common stock bearing the NAIC designation "U" provide: the number of such issues

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of by the Company Du	uring the Current Quarter
--	---------------------------

			Show All Le	ong-Term Bonds a	nd Stock Sold, Re	deemed or Otherw	ise Disposed of b	<u>y the Company Du</u>	iring the Curre	ent Quarter						
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
										Increase				Interest on	Dividends on	
									Increase	(Decrease)	Foreign			Bonds	Stocks	NAIC
CUSIP				Number of				Book/Adjusted	(Decrease)	by Foreign	Exchange	Realized Gain	Total Gain	Received	Received	Desig-
Identi-		Disposal		Shares of				Carrying Value at	by	Exchange	Gain (Loss)	(Loss) on	(Loss) on	During	During	nation
fication	Description	Date	Name of Purchaser	Stock	Consideration	Par Value	Actual Cost	Disposal Date	Adjustment	Adjustment	on Disposal	Disposal	Disposal	Year	Year	(a)
6099999 - To		Date	Name of Fulchaser	Otock	Consideration	i ai vaiue	Actual Cost	Disposai Date	Aujustinent	Aujustinent	on Disposai	Disposai	Disposai	i cai	XXX	XXX
6500000 To	nar - Bonus Stal - Preferred Stocks					XXX								XXX		XXX
7000000 To	otal - Common Stocks					XXX								XXX	 	XXX
7100000 To	otal - Preferred and Common Stocks					XXX								XXX	 	XXX
7 199999 - 10	ntar - Preferred and Common Stocks		T	ı		۸۸۸								۸۸۸		
		· · · · · · · · · · · · · · · · · · ·														
										-						
				l	 			 	 		 			 		
		· · · · · · · · · · · · · · · · · · ·														
		• • • • • • • • • • • • • • • • • • •			***************************************											
								į								
								ļ								
								·····	ļ	-						ļ
					ļ			ļ	ļ	-	ļ					ļ
		· · · · · · · · · · · · · · · · · · ·														
		•														
								·····		-						
				l	 			 	 	·	 			 		·····
		· · · · · · · · · · · · · · · · · · ·						l								
7299999 To	atale	***************************************	1	·····		XXX	•••••								***************************************	XXX
1299999 10	orais				1	۸۸۸		1								

⁽a) For all common stock bearing the NAIC designation "U" provide: the number of such issues

SCHEDULE DB - PART A - SECTION 1

Showing all Options, Caps, Floors and Insurance Futures Options Owned at Current Statement Date 1 2 3 4 5 6 7 9 0 10 11 12 13 14													
1	2	3	4	5	6	7	8	9	10	11	12	13	14
'	_		· ·	ŭ	ŭ	·	ľ	Ŭ		• •			
		Data of									Year to Date		
	1	Date of									real to Date		
	Number of	Maturity,									Increase/	Used to Adjust	Other Investment/ Miscellaneous
	Contracts or	Expiry, or	Strike Price, Rate or Index	Date of		Cost/Option Premium					(Decrease) by	Basis of Hedged	Miscellaneous
Description	Notional Amount	Settlement	or Index	Acquisition	Exchange or Counterparty	Premium	Book Value	*	Statement Value	Fair Value	Adjustment	Item	Income
Description	Notional Amount	Settlement	Of ITIGEX	Acquisition	Exchange of Counterparty	i ieiiliaiii	Dook value		Statement value	i ali value	Aujustinent	пеш	income
	.										L		.
								ĺ	Ì				İ

								· · · · · · · · · · · · · · · · · · ·	•				
	İ	İ	İ	Ï			Ī	İ	Ī		Î	İ	İ
									•				
	-								+				
									L				
	1	***************************************											
	1	†							†				·
	-	 					·		+				-
		ļ					ļ				ļ	ļ	.
2599999 - Subtotal - Hedging Transactions	•	•	•					XXX					
2799999 - Subtotal - Other Derivative Transactions								XXX					<u> </u>
9999999 - Totals							1	XXX				ĺ	1

SCHEDULE DB - PART B - SECTION 1

		Sh	owing all Options	, Caps, Floo	rs and Insurance Futures Opti	ons Written and In-	-Force at Current S	Statemen	t Date				
1	2	3	4	5	6	7	8	9	10	11	12	13	14
				_	_							-	
		Date of									Year to Date		
	Number of	Maturity,		Date of							Increase/		Other Investment/
	Contracts or	Expiry or	Strike Price Rate			Consideration					(Decrease) by	Used to Adjust	Miscellaneous
Description	Contracts or Notional Amount	Settlement	or Index	Purchase	Exchange or Counterparty	Received	Book Value	*	Statement Value	Fair Value	Adjustment	Basis	Income
Description	Notional Amount	Settlement	OI IIIGEX	i uiciiase	Exchange of Counterparty	Neceived	DOOK Value	-	Statement value	i ali value	Aujustinent	Dasis	IIICOITIC
									•••••				
								· · · · · · · · · · · · · · · · · · ·					
								Ĭ					
							-		·····				
2500000 Subtotal Hadging Transactions								XXX					
2599999 - Subtotal - Hedging Transactions 2699999 - Subtotal - Income Generation Transactions													
2700000 Cubtotal Other Periodical Transactions								XXX					
2799999 - Subtotal - Other Derivative Transactions								XXX					
9999999 - Totals							1	XXX					

SCHEDULE DB - PART C - SECTION 1

				Snowing a	ali Collar, Swap ar	ia Forwards Open	at Current Staten	nent va	ite					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Description	Notional Amount	Date of Maturity, Expiry, or Settlement	Strike Price, Rate or Index Rec (Pay)	Date of Opening Position or Agreement	Exchange or Counterparty	Cost or (Consideration Received)	Book Value	*	Statement Value	Fair Value	Year to Date Increase/ (Decrease) by Adjustment	Used to Adjust Basis of Hedged Item	Other Investment/ Miscellaneous Income	Potential Exposure
								 						
												•		
														
2599999 - Subtotal - Hedging Transactions						XXX								
2799999 - Subtotal – Other Derivative Transactions						XXX								
9999999 - Totals						XXX								

SCHEDULE DB - PART D - SECTION 1

		Showing all F	utures Contracts	and Insurance Fu	tures Contracts C	pen at Current St	atement Date					
1	2	3	4	5	6	7	8	9	Variation Margin Information			13
									10	11	12	
										Used to Adjust		
	Number of					Date of	Exchange or			Basis of		Potential
Description	Contracts	Maturity Date	Original Value	Current Value	Variation Margin	Opening Position	Counterparty	Cash Deposit	Recognized	Hedged Item	Deferred	Exposure
										·		
			l	i						İ		
										†		
2599999 - Subtotal - Hedging Transactions						XXX	XXX					
2799999 - Subtotal - Other Derivative Transactions						XXX	XXX					
9999999 - Totals						XXX	XXX					

SCHEDULE E - PART 1 - CASH Month End Depository Balances

	<u>Mo</u> nt	h End Deposito	ry Balances				8		
1	2	3	4		Book Balance at End of Each				
				Month During Current Quarter					
		Amount of	Amount of	5	6	7			
		Interest	Interest						
	.	Received	Accrued at						
	Rate	During	Current						
Danasitan	of	Current	Statement	Cinet Manth	On a see of Manage	Thind Manuals			
Depository	Interest	Quarter 65,451	Date	First Month	Second Month 17,069,753	Third Month	+-		
Comerica Bank	•		0	236,763	237 0/0	237,017			
0199998 Deposits in depositories which do			0	200,700	207,043				
0199998 Deposits in									
(See Instructions) - Open Depositories	XXX						XXX		
0199999 Totals - Open Depositories	XXX	66,327	0	16,131,231	17,306,802	22,052,084			
	••••								
	••••					 			
	••••								
									
							-1		
	•						-[
	••••	i		i		 			
	••••								
	••••								
							-		
	••••								
	••••					 			
	••••								
	••••								
	••••								
	••••						7		
	••••								
	••••								
							-1		
	••••						-		
							i		
	••••								
	••••						-		
]		
1									
	••••								
000000 Tatal Cosh on Dannai i	yvv	00 007		40 404 004	47 000 000	00 000 004			
0399999 Total Cash on Deposit	XXX	66,327	0	16,131,231	17 , 306 , 802	22,052,084			
	XXX XXX XXX	66,327 XXX 66,327	0 XXX 0	16,131,231 16,131,231	17 ,306 ,802 17 ,306 ,802	22,052,084	XXX		